

Draft Regulations

Draft Regulation

Act respecting health services and social services
(chapter S-4.2)

Certification of community or private resources offering addiction lodging — Amendment

Notice is hereby given, in accordance with sections 10 and 11 of the Regulations Act (chapter R-18.1), that the Regulation to amend the Regulation respecting the certification of community or private resources offering addiction lodging, appearing below, may be made by the Government on the expiry of 45 days following this publication.

The draft Regulation provides that Native addiction lodging centres accommodating mainly Native clients and whose services are funded by the federal government are not considered addiction resources within the meaning of the Regulation respecting the certification of community or private resources offering addiction lodging (chapter S-4.2, r. 0.1).

Further information on the draft Regulation may be obtained by contacting Geneviève Landry, Assistant Director General, Direction générale adjointe de la coordination interne, de la qualité et des affaires autochtones, Direction générale de la coordination réseau et ministérielle et des affaires institutionnelles, Ministère de la Santé et des Services sociaux, 1075, chemin Sainte-Foy, 3^e étage, Québec (Québec) G1S 2M1; email: genevieve.landry@msss.gouv.qc.ca.

Any person wishing to comment on the draft Regulation is requested to submit written comments within the 45-day period to the Minister of Health, 1075, chemin Sainte-Foy, 15^e étage, Québec (Québec) G1S 2M1; email: ministre@msss.gouv.qc.ca.

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Regulation to amend the Regulation respecting the certification of community or private resources offering addiction lodging

Act respecting health services and social services
(chapter S-4.2, s. 346.0.21, 1st par.)

1. The Regulation respecting the certification of community or private resources offering addiction lodging (chapter S-4.2, r. 0.1) is amended in section 1 by replacing the second paragraph by the following:

“Despite the first paragraph, the following are not addiction resources:

(1) a place accommodating exclusively persons referred by the correctional services of Québec or Canada that is recognized by either service as a community residential centre;

(2) a Native addiction lodging centre accommodating mainly Native clients and whose services are funded by the federal government.”.

2. This Regulation comes into force on 1 December 2024.

106981

Draft Regulation

Act respecting end-of-life care
(chapter S-32.0001)

Procedure followed by the Commission sur les soins de fin de vie to assess compliance with the criteria for the administration of medical aid in dying and the information to be sent to the Commission for that purpose — Amendment

Notice is hereby given, in accordance with sections 10 and 11 of the Regulations Act (chapter R-18.1), that the Regulation to amend the Regulation respecting the procedure followed by the Commission sur les soins de fin de vie to assess compliance with the criteria for the administration of medical aid in dying and the information to be sent to the Commission for that purpose, appearing below, may be made by the Government on the expiry of 45 days following this publication.

The draft Regulation prescribes the information that must be sent to the Commission sur les soins de fin de vie by

—a competent professional who administers medical aid in dying to an end-of-life patient who became incapable of giving consent to care after making a request for medical aid in dying and who had given consent, in writing by means of the form prescribed by the Minister of Health and in the presence of a competent professional, within 90 days before the date of administration of the medical aid in dying, to receiving that aid even if the person were to become incapable of giving consent to care before the administration of the aid;

—a competent professional having received a request for medical aid in dying who does not administer such aid to the person having made the request, where any of the events provided for in the first paragraph of section 47.1 of the Act respecting end-of-life care (chapter S-32.0001) occur, as well as the manner in which the information is to be sent;

—a pharmacist who provides a medication or a substance to a competent professional for the purpose of the administration of medical aid in dying, as well as the manner in which the information is to be sent.

The draft Regulation also makes certain specifications to the information that must be sent to the Commission where the person having made a request for medical aid in dying had a serious physical impairment causing significant and enduring disabilities.

The draft Regulation also eliminates the time period during which the Commission must conserve the information sent to it.

The draft Regulation also adds the following in particular to the information that must be sent to the Commission:

—where medical aid in dying is administered in a place other than a facility maintained by an institution, the premises of a palliative care hospice or the person's home, a mention that the place in question was authorized in accordance with the second paragraph of section 4 of the Act respecting end-of-life care;

—a mention that the competent professional is a physician or a specialized nurse practitioner.

Lastly, the draft Regulation makes additional amendments to the Regulation respecting the procedure followed by the Commission sur les soins de fin de vie to assess compliance with the criteria for the administration of medical aid in dying and the information to be sent to the Commission for that purpose (chapter S-32.0001, r. 1), in particular to clarify or remove certain information that must be sent to the Commission by a competent professional having administered medical aid in dying.

Further information on the draft Regulation may be obtained by contacting Geneviève Landry, Assistant Director General, Direction générale adjointe de la coordination interne, de la qualité et des affaires autochtones, Direction générale de la coordination réseau et ministérielle et des affaires institutionnelles, Ministère de la Santé et des Services sociaux, 1075, chemin Sainte-Foy, 3^e étage, Québec (Québec) G1S 2M1; email: genevieve.landry@msss.gouv.qc.ca.

Any person wishing to comment on the draft Regulation is requested to submit written comments within the 45-day period to the Minister Responsible for Seniors and Minister for Health, 1075, chemin Sainte-Foy, 15^e étage, Québec (Québec) G1S 2M1; email: ministre.deleguee@msss.gouv.qc.ca.

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Regulation to amend the Regulation respecting the procedure followed by the Commission sur les soins de fin de vie to assess compliance with the criteria for the administration of medical aid in dying and the information to be sent to the Commission for that purpose

Act respecting end-of-life care
(chapter S-32.0001, s. 46, 1st par., s. 47, 1st par., s. 47.1, 2nd par., and s. 47.2)

1. The Regulation respecting the procedure followed by the Commission sur les soins de fin de vie to assess compliance with the criteria for the administration of medical aid in dying and the information to be sent to the Commission for that purpose (chapter S-32.0001, r. 1) is amended in the title by replacing “for that purpose” by “by a competent professional and by a pharmacist”.

2. The heading of Chapter I is amended by replacing “SUR LES SOINS DE FIN DE VIE” by “BY A COMPETENT PROFESSIONAL TO ASSESS COMPLIANCE WITH THE CRITERIA FOR THE ADMINISTRATION OF MEDICAL AID IN DYING”.

3. Section 1, amended by section 1 of the Regulation to amend the Regulation respecting the procedure followed by the Commission sur les soins de fin de vie to assess compliance with the criteria for the administration of medical aid in dying and the information to be sent to the Commission for that purpose enacted by Order in Council 1020-2024 dated 26 June 2024, is further amended by replacing “A” by “The”.

4. The first paragraph of section 3, amended by section 3 of the Regulation to amend the Regulation sur les soins de fin de vie to assess compliance with the criteria for the administration of medical aid in dying and the information to be sent to the Commission for that purpose enacted by Order in Council 1020-2024 dated 26 June 2024, is further amended

(1) in subparagraph 1,

(a) by replacing “and that there is proof in the record, as well as the date of expiry of the person’s health insurance card or, failing that, an indication that the competent professional verified that the person is considered an insured person within the meaning of the second paragraph of section 26 of the Act respecting end-of-life care (chapter S-32.0001), and that there is proof in the record” in subparagraph *c* by “or that the person is considered an insured person within the meaning of the second paragraph of section 26 of the Act respecting end-of-life care (chapter S-32.0001)”;

(b) by replacing “and assessment of vital prognosis” in subparagraph *d* by “, assessment of the prognosis for the illness or a description of the anticipated clinical course of the physical impairment as well as the detailed clinical picture”;

(c) by replacing subparagraph *h* by the following:

“(h) an indication that the competent professional made sure that the person was capable of giving consent to care and the reasons leading the competent professional to that conclusion and, if the person had become incapable of giving consent to care before the administration of medical aid in dying, that the following criteria was complied with at the end of life and before the person became incapable of giving consent to care:

i. the criteria set out in the first paragraph of section 29 of the Act respecting end-of-life care had been met;

ii. the person consented, in writing on the form prescribed by the Minister of Health and Social Services and in the presence of a competent professional, within 90 days before the date of administration of the medical aid in dying, to receiving the aid even if they were to become incapable of giving consent to care before the administration of the aid;

iii. the person did not express any refusal to receive medical aid in dying;

(h.1) the date on which the form referred to in subparagraph ii of subparagraph *h* was completed, if applicable;”;

(d) by striking out “and their conclusions” in subparagraph *j*;

(e) by replacing subparagraphs *k* and *l* by the following:

“(k) an indication of whether or not the person had the opportunity to discuss the request with all the persons that he or she wished to contact and, if applicable, the reasons why the person could not do so;

(l) a description of the palliative care received by the person, if applicable;

(m) if the person had a physical impairment, an indication that the competent professional made sure that the person evaluated the possibility of obtaining support, advisory or assistance service and, if applicable, a description of the services received by the person;”;

(2) in subparagraph 2,

(a) by striking out subparagraph *f*;

(b) in subparagraph *h*,

i. by replacing subparagraph *i* by the following:

“i. the medical diagnosis and the prognosis for the illness or the anticipated clinical course of the physical impairment;”;

ii. by inserting “, as well as, if applicable, the appropriate measures for compensating for the person’s disabilities and any other care that can be offered” at the end of subparagraph *ii*;

iii. by replacing “available options for end-of-life care if indicated, in particular palliative care, including palliative sedation” by “end-of-life care if indicated, in particular palliative care, including continuous palliative sedation” in subparagraph *iii*;

(c) by replacing “the date of the discussions and their conclusions” in subparagraph *j* by “the conclusions of those discussions”;

(3) by inserting the following after paragraph 2:

“(2.1) concerning the competent professional who administered medical aid in dying, an indication that he or she is a physician or a specialized nurse practitioner and, if applicable, was treating the person who requested the medical aid in dying before the request was made;”;

(4) in subparagraph 3,

(a) by replacing subparagraph *a* by the following:

“(a) an indication that the physician made sure of his or her independence with respect to the person having requested medical aid in dying and the competent professional having administered it;”;

(b) by striking out subparagraph *b*;

(c) by replacing “the date on which” in subparagraph *c* by “the date or dates on which”;

(d) by inserting “and the date on which the physician signed the opinion” at the end of subparagraph *e*;

(e) by inserting the following after subparagraph *e*:

“(f) an indication that he or she is a physician or a specialized nurse practitioner and, if applicable, was treating the person who requested the medical aid in dying before the request was made;”;

(5) in subparagraph 4,

(a) by striking out subparagraph *b*;

(b) by replacing “administrative” in subparagraph *c* by “health”;

(c) by inserting “and indicate if that place was authorized in accordance with the second paragraph of section 4 of the Act respecting end-of-life care” at the end of subparagraph *iv* of subparagraph *d*.

5. Section 6, amended by section 4 of the Regulation to amend the Regulation respecting the procedure followed by the Commission sur les soins de fin de vie to assess compliance with the criteria for the administration of medical aid in dying and the information to be sent to the Commission for that purpose enacted by Order in Council 1020-2024 dated 26 June 2024, is further amended by replacing “by mail or by any other means” by “by any means”.

6. Section 7, amended by section 5 of the Regulation to amend the Regulation respecting the procedure followed by the Commission sur les soins de fin de vie to assess compliance with the criteria for the administration of medical aid in dying and the information to be sent to the Commission for that purpose enacted by Order in Council 1020-2024 dated 26 June 2024, is revoked.

7. The heading of Chapter II is amended by adding “TO ASSESS COMPLIANCE WITH THE CRITERIA FOR THE ADMINISTRATION OF MEDICAL AID IN DYING” at the end.

8. Section 15, amended by section 8 of the Regulation to amend the Regulation respecting the procedure followed by the Commission sur les soins de fin de vie to assess compliance with the criteria for the administration of medical aid in dying and the information to be sent to the Commission for that purpose enacted by Order in Council 1020-2024 dated 26 June 2024, is replaced by the following:

“CHAPTER II.1

INFORMATION TO BE SENT TO THE COMMISSION BY A COMPETENT PROFESSIONAL IF MEDICAL AID IN DYING WAS NOT ADMINISTERED

DIVISION I

OBLIGATION OF COMPETENT PROFESSIONAL

15. A competent professional having received a request for medical aid in dying who does not administer such aid to the person having made the request must, within 30 days after any of the events referred to in the first paragraph of section 47.1 of the Act respecting end-of-life care (chapter S-32.0001), notify the Commission by sending, according to the event that took place, the information provided for in Division II.

DIVISION II

INFORMATION

15.1. The information to be sent to the Commission is divided into the following 2 separate components:

(1) the information provided for, according to the event that took place, in sections 15.2 to 15.6;

(2) the information provided for in section 15.7 that identifies the competent professional having received a request for medical aid in dying who did not administer such aid to the person having made the request as well as the information that allows the Commission to identify the person who requested medical aid in dying.

15.2. If the competent professional found that the person who made the request for medical aid in dying did not meet the criteria set out in section 29 of the Act respecting end-of-life care (chapter S-32.0001), the information constituting the component referred to in paragraph 1 of section 15.1 is the following:

(1) concerning the person who requested the medical aid in dying:

(a) date of birth;

(b) sex;

(c) the main medical diagnosis and the prognosis for the illness or a description of the anticipated clinical course of the physical impairment, if known by the competent professional;

(d) the information concerning any other service offered to and received by the person to relieve suffering, if applicable;

(2) concerning the request for medical aid in dying:

(a) the date on which the request was completed;

(b) the health region in which it was completed;

(c) the reasons why the competent professional concluded that the person who made the request did not meet the criteria set out in section 29 of the Act respecting end-of-life care;

(3) concerning the competent professional, an indication that he or she is a physician or a specialized nurse practitioner.

15.3. If the competent professional found or was informed that the person who made the request for medical aid in dying withdrew the request, the information constituting the component referred to in paragraph 1 of section 15.1 is the following:

(1) the reasons why the person withdrew the request, if known by the competent professional;

(2) the competent professional's opinion regarding compliance with the criteria set out in section 26 of the Act respecting end-of-life care (chapter S-32.0001) before the person withdrew their request, if applicable;

(3) the information referred to in paragraph 1, subparagraphs *a* and *b* of paragraph 2 and paragraph 3 of section 15.2.

15.4. If the competent professional found or was informed that the person who made the request for medical aid in dying refused to receive such aid, the information constituting the component referred to in paragraph 1 of section 15.1 is the following:

(1) the date on which the person was found incapable of giving consent to care;

(2) the date on which the administration of medical aid in dying was to take place;

(3) an indication that the person had given consent, in writing by means of the form prescribed by the Minister of Health and Social Services and in the presence of a competent professional, to receive medical aid in dying even if the person became incapable of giving consent to care before the administration of the aid as well as the date on which the form was completed, if applicable;

(4) the facts that made it possible to find that the person had expressed his or her refusal;

(5) the information referred to in paragraph 1, subparagraphs *a* and *b* of paragraph 2 and paragraph 3 of section 15.2.

15.5. If the competent professional forwarded a notice of refusal pursuant to section 31 of the Act respecting end-of-life care (chapter S-32.0001), the information constituting the component referred to in paragraph 1 of section 15.1 is the following:

(1) the date on which the competent professional forwarded the notice;

(2) the information referred to in subparagraphs *a* and *b* of paragraph 1, subparagraphs *a* and *b* of paragraph 2 and paragraph 3 of section 15.2.

15.6. If the competent professional found or was informed that the person who made the request for medical aid in dying died before the administration of such aid, the information constituting the component referred to in paragraph 1 of section 15.1 is the following:

(1) the date of death of the person, if known by the competent professional;

(2) the competent professional's opinion regarding compliance with the criteria set out in section 26 of the Act respecting end-of-life care (chapter S-32.0001) before the person died, if applicable;

(3) the date on which the administration of medical aid in dying was to take place, if applicable;

(4) the information referred to in paragraph 1, subparagraphs *a* and *b* of paragraph 2 and paragraph 3 of section 15.2.

15.7. The information constituting the component referred to in paragraph 2 of section 15.1 is the following:

(1) the record number of the person who made a request for medical aid in dying in the institution or the private health facility in which the competent professional having received the request practises and in which the notes concerning that request are recorded, as well as the identification of the institution or private health facility concerned and of the institution's facility concerned, if applicable;

(2) concerning the competent professional who did not administer medical aid in dying:

(a) his or her name and signature;

(b) number of his or her licence to practise;

(c) professional contact information.

15.8. The competent professional must also send to the Commission any other information or comment he or she deems relevant.

15.9. Where the information sent to the Commission is incomplete, Commission members may consult the information referred to in paragraph 2 of section 15.1.

The Commission may then ask the competent professional to provide the additional information.

The decision to consult the information referred to in the first paragraph must be made by the majority of the members present.

15.10. Every competent professional from whom the Commission requests additional information must reply to the Commission within 20 working days after receiving the request.

DIVISION III **FORM**

15.11. The Minister of Health and Social Services makes a form available to every competent professional having received a request for medical aid in dying who does not administer such aid to the person having made the request to fulfill the obligation provided for in section 15.

The form must be designed in such a way that the competent professional may seal the information constituting the component referred to in paragraph 2 of section 15.1 in a manner that prevents the members of the Commission from consulting the information. The members of the Commission may consult the information only in the circumstances provided for in section 15.9.

15.12. The form completed by the competent professional is sent to the Commission by any means that ensures the protection of the information contained therein.

CHAPTER II.2 **INFORMATION TO BE SENT TO THE** **COMMISSION BY A PHARMACIST RELATING** **TO THE PROVISION OF A MEDICATION OR** **A SUBSTANCE FOR THE PURPOSE OF THE** **ADMINISTRATION OF MEDICAL AID IN DYING**

DIVISION I **OBLIGATION OF PHARMACIST**

15.13. A pharmacist who provides a medication or a substance to a competent professional for the purpose of the administration of medical aid in dying to a person must notify the Commission within 30 days by sending it the information provided for in Division II.

DIVISION II **INFORMATION**

15.14. The information to be sent to the Commission is divided into the following 2 separate components:

(1) the information provided for in section 15.15;

(2) the information provided for in section 15.16 that identifies the pharmacist who provided a medication or a substance to a competent professional for the purpose of the administration of medical aid in dying to a person.

15.15. The information constituting the component referred to in paragraph 1 of section 15.14 is the following:

(1) the date on which the medication or substance was provided;

(2) an indication that the medication or substance came from a centre operated by an institution or from a community pharmacy;

(3) the date of birth of the person who requested medical aid in dying and for whom the medication or substance was provided;

(4) the date on which the administration of medical aid in dying was to take place, if known by the pharmacist.

The pharmacist must also send to the Commission any other information or comment he or she deems relevant.

15.16. The information constituting the component referred to in paragraph 2 of section 15.14 is the following:

(1) the pharmacist's name and signature;

(2) number of his or her licence to practise;

(3) professional contact information.

15.17. Where the information sent to the Commission is incomplete, Commission members may consult the information referred to in paragraph 2 of section 15.14.

The Commission may then ask the pharmacist to provide the additional information.

The decision to consult the information referred to in the first paragraph must be made by the majority of the members present.

15.18. Every pharmacist from whom the Commission requests additional information must reply to the Commission within 20 working days after receiving the request.

DIVISION III FORM

15.19. The Minister of Health and Social Services makes a form available to every pharmacist who provides a medication or a substance to a competent professional for the purpose of the administration of medical aid in dying to a person to fulfill the obligation provided for in section 15.13.

The form must be designed in such a way that the pharmacist may seal the information constituting the component referred to in paragraph 2 of section 15.14 in a manner that prevents the members of the Commission from consulting the information. The members of the Commission may consult the information only in the circumstances provided for in section 15.17.

15.20. The form completed by the pharmacist is sent to the Commission by any means that ensures the protection of the information contained therein.”.

9. This Regulation comes into force on the fifteenth day following the date of its publication in the *Gazette officielle du Québec*.

106973

Draft Regulation

Transport Act
(chapter T-12)

Environment Quality Act
(chapter Q-2)

Highway Safety Code
(chapter C-24.2)

Road vehicles used for the transportation of school children — Amendment

Notice is hereby given, in accordance with sections 10 and 11 of the Regulations Act (chapter R-18.1), that the Regulation to amend the Regulation respecting road vehicles used for the transportation of school children, appearing below, may be made by the Government on the expiry of 45 days following this publication.

The draft Regulation adds exceptions for certain minibuses to the requirement to be fully electric for the transport of school children provided by or for a school service centre, a school board or a private educational institution.

The draft Regulation also adds locations served by an independent electric power distribution system to the list of locations that are exempt of that requirement, mentioned in Schedule II to the Regulation respecting road vehicles used for the transportation of school children (chapter T-12, r. 17).

The draft Regulation has no impact on enterprises, including small and medium-sized businesses.

Further information on the draft Regulation may be obtained by contacting Catherine Bouillon, Director, Direction du transport rémunéré et adapté, Direction générale du transport terrestre des personnes, Ministère des Transports et de la Mobilité durable, 700, boulevard René-Lévesque Est, 15^e étage, Québec (Québec) G1R 5H1; email: catherine.bouillon@transports.gouv.qc.ca.

Any interested person wishing to comment on the draft Regulation is requested to submit written comments within the 45-day period to the Minister of Transport and Sustainable Mobility, 700, boulevard René-Lévesque Est, 29^e étage, Québec (Québec) G1R 5H1; email: Projet.reglement@transports.gouv.qc.ca.

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Regulation to amend the Regulation respecting road vehicles used for the transportation of school children

Transport Act
(chapter T-12, s. 5, par. a)

Environment Quality Act
(chapter Q-2, s. 53, pars. a and b, and s. 95.1, 1st par., subpar. 29, and 2nd par.)

Highway Safety Code
(chapter C-24.2, s. 618, par. 7)

1. The Regulation respecting road vehicles used for the transportation of school children (chapter T-12, r. 17) is amended in section 6.1 by replacing the second paragraph by the following:

“The first paragraph does not apply to a school bus used for the transportation of school children in a location served by an independent electric power distribution system and listed in Schedule II.”.